PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	ng the Patent, advance or nerwise in Block 1, by (a	ders and notification a) specifying a new co	of m orresp	aintenance fees woondence address;	/ill be n and/or	nailed to the current (b) indicating a sepa	correspoi rate "FEI	E ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
24011 7590 06/01/2007					Certificate of Mailing or Transmission					
					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
AUSTRALIA									(Depositor's name)	
									(Signature)	
				L					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		ATTO		TORNEY DOCKET NO.		CONFIRMATION NO.	
10/534,830	34,830 05/13/2005		Kia Silverbrook			MJT001USNP			9040	
TITLE OF INVENTION	: THERMAL INK JET I	PRINTHEAD WITH SUS	SPENDED BEAM HE	ATE	R					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0		\$1700		09/04/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS							
STEPHENS, JUANITA DIONNE 2853		2853	347-064000							
1. Change of corresponde CFR 1.363).	2. For printing on the patent front page, list									
	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,									
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print of	r typ	e)					
PLEASE NOTE: Uni recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on t T a substitute for filing	he pa g an a	itent. If an assign issignment.	ee is id	entified below, the de	ocument	nas been med for	
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Silverbrook Research Pty Ltd			Balmain, New South Wales, Australia							
Please check the appropr	riate assignee category or	r categories (will not be pr	rinted on the patent):		Individuai 🔀 Co	orporation	on or other private gro	oup entity	Government	
				t of Fec(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee Dublication Fee (1)	A check is enclosed. Payment by credit card. Form PTO-2038 is attached.									
Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 504049 (enclose an extra copy of this form).									
5. Change in Entity Sta							2.35.0	SD 1 22/	\/2\	
a. Applicant claim	s SMALL ENTITY state	us. See 37 CFR 1.27. puired) will not be accepte					TITY status. See 37 C			
NOTE: The Issue Fee ar interest as shown by the	records of the United Sta	uired) will not be accepte ates Patent and Trademark	Office.	nan u	ne applicant, a reg	istered a	ttorney or agent, or tr	- assigne		
Authorized Signature					Date31	Augu	st, 2007			
Typed or printed name Kia Silverbrook										
This collection of inforn an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, \ Alexandria, Virginia 22.	nation is required by 37 on tality is governed by 35 d application form to the ions for reducing this buying into 22313-1450. Do 313-1450.	CFR 1.311. The information of U.S.C. 122 and 37 CFR e USPTO. Time will varurden, should be sent to the ONOT SEND FEES OR persons are required to re-	y depending upon the chief Information (COMPLETED FORM	indiv Office 1S TO	ridual case. Any cor, U.S. Patent and D THIS ADDRES	omment Traden S. SENI	s on the amount of ti- nark Office, U.S. Dep D TO: Commissioner	me you reartment of for Paten	equire to complete of Commerce, P.O. its, P.O. Box 1450,	